

Deposit Account Statement

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Deposit Account Statement

Requested Statement Month: August 2007
 Deposit Account Number: 504041
 Name: THOMAS R. VIGIL ESQUIRE
 Attention: THOMAS R. VIGIL
 Street Address 1: 221 N. LASALLE, ROOM 2036
 Street Address 2:
 City: CHICAGO
 State: IL
 Zip: 60601
 Country: UNITED STATES

DATE SEQ	POSTING REF TXT	ATTORNEY DOCKET NBR	FEE CODE	AMT	BAL
08/01 279	11799931	VCRU-40002	2617	\$65.00	\$955.00
08/01 12347	E-REPLENISHMENT		9203	-\$300.00	\$1,255.00
08/08 20	11597023	VMP-40006	1051	\$130.00	\$1,125.00
08/08 59	29289745	VWWH-40065	8021	\$40.00	\$1,085.00
08/08 7683	11597023		8021	\$40.00	\$1,045.00
08/13 27	11799931	VCRU-40002	2617	-\$65.00	\$1,110.00
08/13 28	11799931	VCRU-40002	2051	\$65.00	\$1,045.00
08/14 404	10597023	17029US	2617	\$65.00	\$980.00
08/15 133	11597023	VMP-40006	1617	\$130.00	\$850.00
08/16 2714	E-REPLENISHMENT		9203	-\$500.00	\$1,350.00
08/16 8503	10560222		8021	\$40.00	\$1,310.00
08/16 319	10560222	VFM-40030	1617	\$130.00	\$1,180.00
08/16 320	10560222	VFM-40030	1618	\$130.00	\$1,050.00
	START BALANCE	SUM OF CHARGES	SUM OF REPLENISH	END BALANCE	
	\$1,020.00	\$835.00	\$865.00	\$1,050.00	

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